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ABSTRACT

Goal One of the six national education goals now embodied in the Goals 2000: Educate America Act states that "By the year 2000, all children in America will start school ready to learn." One of the objectives formulated to meet this goal asserts that "Children will receive the nutrition and health care needed to arrive at school with healthy minds and bodies." This digest summarizes government and private efforts to fulfill this objective. Federal programs which serve preschoolers' health and nutrition needs include Project Head Start; Medicaid; and the Supplemental Food Program for Women, Infants, and Children. Examples of state-funded programs include the establishment of service centers in Kentucky and Hawaii, and support provided by nutritionists to citizens in Mississippi. Efforts to serve preschoolers' health and nutrition in health care settings include immunizations programs; a campaign to educate parents about the connection between their children's health and education; low-cost health care services provided by community health centers; and recommendations concerning children's health and nutrition offered by several commissions and organizations. Preschoolers' health and nutrition is fostered in the preschool setting by serving nutritious food in preschools, teaching children about cooking, establishing nutrition data systems, and establishing health and nutrition guidelines to be applied to child care facilities. Community initiatives include efforts to teach Mexican-American parents about their children's food requirements, establishing data systems to track families with preschool children, and instructing health care professionals about culturally appropriate ways to work with American Indian families. (BC)

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Health Care, Nutrition, and Goal One

Bernard Cesarone

In April, 1993, President Clinton sent to congress the Goals 2000: Educate America Act, which embraces the objectives of Goal One of the six national education goals. Goal One states that "By the year 2000, all children in America will start school ready to learn." One of the objectives formulated to meet this goal asserts that "Children will receive the nutrition and health care needed to arrive at school with healthy minds and bodies."

Problems which can affect children's later development and school readiness include lack of prenatal care, low birth weight, maternal substance abuse, malnutrition, vaccine-preventable diseases, sensory impairments, high blood lead levels, and anemia. Efforts to promote children's health and nutrition, and to prevent children's illness, include federal and state programs, and initiatives to serve preschool children in health care settings, in preschool programs, and in community settings. These efforts address prenatal care, health and nutrition of the developing child, parent education, preschool teacher education, and health and nutrition instruction for preschool children.

Federal and State Programs

Several federal programs which serve preschoolers' health and nutrition needs are managed by the U.S. Department of Health and Human Services. Project Head Start seeks to improve the social and educational competence of poor children through education, health, and social services. The Maternal and Child Health Block Grant Program provides poor women and children with perinatal care, nutrition services, immunizations, and health screening. Medicaid pays for the health care of poor children and families. The Early and Periodic Screening, Diagnosis and Treatment Program, which is part of Medicaid, contributes to improvements in the health of children from low-income families by funding immunizations, vision and hearing tests, and dental care. The U.S. Department of Agriculture operates the Supplemental Food Program for Women, Infants, and Children (WIC), which provides supplemental foods, nutrition education, and an entry point into health care services for pregnant and breastfeeding women and for children up to five years of age who are identified as nutritionally at risk (NHEC, 1992).

Many of the federal programs profiled above are administered by states, or are jointly funded with federal and state monies. Several states have launched efforts of their own to serve preschoolers' health and nutrition needs. The Kentucky Education Reform Act of 1990 authorized the establishment of family service centers in many of the state's school districts. Project Healthy Start in Hawaii consists of one-stop service centers located throughout the state to serve children and families at risk (Boyer, 1991). As part of Project Network of the Mississippi State Department of Health, nutritionists provide support and technical assistance to caregivers; develop education materials; and develop and implement community-based educational projects for nutrition students and health professionals (Ford, 1991).

Preschoolers' Health and Nutrition in Health Care Settings

In recent years, the increase in reported cases of preventable diseases such as measles and mumps has prompted individuals, groups, and school districts to undertake efforts to improve the immunization status of the preschool population. Early in 1993, President Clinton offered a proposal which, if adopted, would ensure the immunization of all preschool children.

The National Health/Education Consortium has begun a campaign to educate parents about the connection between their children's health and education, and inform them about promoting their children's learning. This multimedia campaign consists of videos that stress the importance of prenatal care, nutrition, immunizations, and periodic health screening; note pads with messages reminding parents of the health-education connection; and public service announcements (NHEC, 1993).

A number of model programs in the health care professions have had a positive impact on young children's health and nutrition. The Jackson-Hinds Comprehensive Health Center, for example, serves the health needs of poor children and adults in the city of Jackson and Hinds County, Mississippi, by providing free or low-cost health care to its patients. Services include acute medical and dental care, medical examinations, follow-up treatment, and health education. The center provides transportation for its patients (CDF, 1991).

Recommendations concerning the provision of health and nutrition services to preschool children have been offered by many commissions and organizations, including the National Commission on Children, the National Education Association, and the National Education Goals Panel. The Carnegie Foundation for the Advancement of Teaching recommends a three-pronged strategy to improve young children's health prospects: a national network of Ready-to-Learn clinics, a fully funded WIC, and comprehensive health education programs in all schools. The Ready-to-Learn clinics would be located in or near public schools, and would offer prenatal and other care for mothers, and health services for preschool children, including regular checkups, screening for vision and hearing problems, and testing for lead poisoning (Carnegie, 1990).

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Preschoolers' Health and Nutrition in Preschool Settings

Head Start and other preschool programs participate in many of the federal and state programs described above. In addition, the health and nutrition status of preschool children can be addressed through preschool teaching methods and curriculum materials, model preschool programs, and standards and recommendations for preschool facilities.

Some research has indicated that there is a connection between food additives and children's learning disabilities, and that children who eat an adequate breakfast show better late morning learning than other children. For these reasons, children in the preschool setting should be provided with nutritious breakfasts and snacks and should be offered nutritious foods such as fruits and vegetables instead of junk foods high in sugar, salt, and fat (Rothlein, 1991). One way to foster children's interest in nutritious food is to engage children in cooking experiences in the preschool classroom (Cosgrove, 1991).

A model program to serve children at risk of developmental delay and poor nutrition is the EARLY START project in Massachusetts. This project established a system of screening to identify children at nutritional risk, established a centralized nutritional data system for children from birth through three years of age, and provided nutrition training for parents and caregivers (Bayerl and Ries, 1992).

Many states and organizations have developed health and nutrition guidelines to be applied to child care facilities. The American Public Health Association and the American Academy of Pediatrics, for example, jointly published a set of standards for out-of-home child care programs. Among the topics addressed in these standards are health consultants to child care programs, staff health, health education, health protection and promotion in child care programs, special facilities for ill children, and preschoolers' nutrition. Standards for dealing with specific infectious diseases are also elaborated (APHA and AAP, 1992).

Preschoolers' Health and Nutrition in Community Settings

Los Ninos agency in San Ysidro, California, serves Mexican and Mexican-American children living in *colonias* along the California-Mexico border. The agency's efforts include teaching parents about basic food requirements, helping mothers plan menus and purchase food, and encouraging families to plant gardens to improve their diet with home-grown fruits and vegetables. The Data Care program in Richmond, Kentucky, is a comprehensive data system developed to track families with preschool children living in isolated communities. Parents who enroll their children in the system receive reminders when preventive health care visits to clinics are required for immunizations and well-baby checkups. Pathways to Understanding in Bernalillo, New Mexico, seeks to increase the effectiveness of health care professionals working with American Indian families by improving their knowledge of culturally appropriate methods of providing care to American Indian children (Ford, 1991).

Conclusion

Research has shown that poor health affects children's learning. The effects include cognitive and socioemotional deficits, low scores on developmental and achievement tests, and inattentiveness. Programs that provide children with access to good nutrition and health care and education about health and nutrition, such as those described in this digest, can lessen or eliminate these detrimental effects and foster the school readiness of preschool children.

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